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Bib Data Sheet

SERIAL NUMBER 10/767,673	FILING OR 371(c) DATE 01/29/2004 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 9417.17685-DIV
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APPLICANTS

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CHM

** CONTINUING DATA *****

This application is a DIV of 10/041,722 01/08/2002 PAT 6,736,852 which claims benefit of 60/271,895
 02/27/2001

CHM

** FOREIGN APPLICATIONS *****

CHM NO RE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 06/17/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after		
Verified and Acknowledged	<i>CHM</i> <i>CHM</i>		
Examiner's Signature	Initials		
STATE OR COUNTRY NC	SHEETS DRAWING 34	TOTAL CLAIMS <i>2</i>	INDEPENDENT CLAIMS 1

ADDRESS
26308

TITLE

Adjustable bone prostheses and related methods

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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